

**Washington State Department of Health
Tobacco Disparities Advisory Committee Meeting Notes
January 28, 2005
9:15am-3:30pm**

Present: Leslie C. Benoit, Kelly Bolson, Shelley Cooper-Ashford, Mary Dzieweczynski, Ricardo Garcia, Nichole Hildebrandt, Elaine Ishihara, Mandy Ma, Nancy Meyer, Carrie Nass, Katharine Sanders, Cheri Stoker, Elizabeth Thomas, Rudy Vasquez
Facilitator: Ira SenGupta; Recorder: Alyssa Sampson
DOH staff: Dave Harrelson, Patty Hayes, Terry Reid, Linc Weaver

Agenda Item	Key Content/Discussion Points	Outcome/Action to be Taken
Welcome and review agenda Ira SenGupta, TDAC Facilitator, Cross Cultural Health Care Program	<i>Handouts:</i> TDAC member list, meeting agenda, <i>Tobacco Prevention and Control in Washington State: Progress Report 2003, Strategic Plan for Identifying and Eliminating Tobacco-Related Health Disparities in Washington State: Overview</i>	None
Introductions TDAC members	<ul style="list-style-type: none"> Members offered their name, organizational or community affiliation, and two community voices they bring to the table <i>Handouts: none</i>	Prepare and distribute information shared
Comments from DOH Leadership Patty Hayes, Asst. Secretary, Div. of Community & Family Health	<ul style="list-style-type: none"> She wants her Division to be flexible enough to be effective and adapt to changing community needs She's committed to looking broadly and at long haul, at all programs Addressing health disparities will be a priority for her Division; The lessons learned through the work of the tobacco program and TDAC will be crucial to this effort Gov. Christine Gregoire has accountability theme: efficiency, accountability, "value added", from the public's perspective. The tobacco program is already working this way and so is positioned to make a big impact. Program within Linc Weaver's Office of Community Wellness & Prevention coordinate DOH efforts focused on prevention and chronic diseases. Efforts are underway to get programs working together from a "whole person" perspective", rather than a doing "organ of the day." <i>Handouts: none</i>	None
Intro to WA State Tobacco Program	<ul style="list-style-type: none"> The presenter talked about the four goals of the state's tobacco plan and how 	Post the powerpoint presentation

<p>and Strategic Priorities Terry Reid, Prog. Mgr.—DOH Tobacco Prevention and Control Program</p>	<p>the plan was created. He also talked about the current components of the program and the new strategic priorities the program will follow in the coming years.</p> <ul style="list-style-type: none"> • He spoke about the programs’ target audiences, evolution, funding and budget including the disparities budget, program impacts, and the work ahead. <p>Questions and Answers Q: Is it possible to get data about specific communities or localities/geographic areas? A: Currently it is possible to get county-level data from BRFSS (Behavior Risk Factor Surveillance System), but the numbers surveyed in communities of color is too small to draw meaningful conclusions. The “oversampling” DOH completed in the African American, Latino/Hispanic, Asian American-Pacific Islander, and American Indian populations should provide better community-specific data.</p> <p>Q: Can DOH provide information on how tobacco funding is being used in specific programs? A: ? [original answer written above to this question was about WIC and didn’t make much sense, but there was definitely a question asked at the meeting about DOH providing info on how tobacco funding is being used in specific programs. It was removed not only because it was vague but because it had more to do with the following question rather than any question’s answer]</p> <p>Q: Since brief intervention trainings are happening in WIC programs, can DOH work with DSHS to insure that there is a systems change in WIC so the workers have a format for asking and capturing data and so that there can be some form of assessment as to whether the BI is being done. A: ? [the above question was supplied in a comment on the meeting minutes, as it wasn’t in the minutes originally, but an answer was not supplied with it]</p> <p>Q: Where were the teen health surveys done? A: Healthy Youth surveys are completed every two years in schools (grades 6, 8, 10, and 12). King County schools did not participate well in 2002 so the King County and statewide data had limitations. 2004 looks better.</p> <p>Q: When is DOH going to increase its paid advertising in priority communities? A: The Tobacco Prevention and Control Program does not have sufficient funding to pay for extensive advertising/sustained campaigns in priority communities. The tobacco program has begun working with priority communities to develop some materials and strategies that are community-specific. DOH has begun funding a variety of public health advertisements in priority media during “opportunity months” (such as Black History Month) as a first step in learning to advertise in</p>	<p>on the disparities webpage</p> <p>Send copy of powerpoint presentation with minutes to TDAC members</p>
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	<p>underserved communities. They have established a department-wide committee to do planning so culturally appropriate ads can be placed according to public health concerns in each community. DOH understands this is insufficient, but it is a start. DOH desires to get beyond this approach. TDAC members supported DOH efforts as a “good start” but cautioned that efforts should be made to support more sustained advertising campaigns in these communities.</p> <p><i>Handouts: none</i></p>	
<p>History of Tobacco Program Advisory Group and Strategic Plan to Address related Health Disparities Shelley Cooper-Ashford, Center for Multicultural Health; Elaine Ishihara, Asian Pacific Islander Coalition Against Tobacco; Mary Dziejewczynski, Verbena</p>	<p>The presenters reviewed the process used by the tobacco program’s Cross Cultural Workgroup on Tobacco, which resulted in the DOH’s <i>Strategic Plan to Identify and Eliminate Tobacco-related Health Disparities in Washington State</i>. The plan addresses 6 critical issues identified through community assessments done in 6 communities. The presenters reviewed the Executive Summary of the plan and talked about the goals and strategies that should be used to address these disparities across WA state. The TDAC will guide the tobacco program in the implementation of the plan. The strategic plan and the executive summary can be found at the program’s webpage on tobacco –related health disparities (www.doh.wa.gov/tobacco/disparities/disparity.htm).</p> <p>The presenters also talked about activities already underway:</p> <ul style="list-style-type: none"> • Funding five communities (African American, Asian American Pacific Islander, Latino/Hispanic, Urban Indians and Tribes, LGBTQ (lesbian/gay/bisexual/transgender/questioning) • Funding Cross Cultural Leadership Institute • Beginning to fill gaps with culturally appropriate materials • Brief Intervention Training for WIC and First Steps providers • Meetings with tobacco Quitline to make more culturally appropriate services. Culturally appropriate strategies for promotion of Quitline to 18-29 year olds. <p><i>Handouts: none</i></p>	None
<p>TDAC’s Role and Potential Impact Dave Harrelson, Tribal & Disparities Contracts Mgr, DOH Tobacco Prevention & Control</p>	<ul style="list-style-type: none"> • The presenter talked about how the TDAC was formed and what role it would play vs the CCWT. He stated that the responsibilities and process used for TDAC would be different than CCWT based on lessons learned during the strategic planning process • He stated that the method of recruiting and selecting members was as inclusive and objective as possible and was designed to have broad representation so the group could address tobacco-related health disparities in a variety of populations and communities across the state, including at least ½ of the members from populations to be served, representation from the various racial/ethnic communities and LGBT, members representing each type of TPC 	None

	<p>contractor and some “institutional members”</p> <ul style="list-style-type: none"> • He stated that this group being facilitated by the facilitator so the committee could conduct its business as it wished. TPC will solely serve as a source of information and support for the process and will provide clarity on TPC views and expectations. <p><i>Handouts: none</i></p>	
<p>Getting to Know You TDAC Members</p>	<p>Members were asked to describe why they were participating, their expectations, what brought them to the table and what would keep them coming back.</p> <p>Members were also asked to brainstorm ideas for how they would like the meetings to be run and “shared agreements” on how members would work together.</p> <p><u>Group Agreements</u> Question: How do we bring our voice to the table without sacrificing the group? I wanted to be here to represent my community! I thought that’s why I was invited. Where is the fine line?</p> <ul style="list-style-type: none"> • Advocating for one’s community is fine. It’s when communities compete that it becomes inappropriate for this group. Members should represent all underserved communities for the common good. Thus we must try to keep a more global view of the issues discussed. • Pledge to listen, respect • If conflict arises, agenda time must be allowed to deal with the conflict <p><i>Handouts: none</i></p>	<p>Attached are members’ responses to the “what brought you” reasons for participation questions and meetings expectations brainstorming session.</p>
<p>Discuss draft of TDAC Charter and Membership Agreement TDAC Members</p>	<p><u>TDAC Charter review</u></p> <ul style="list-style-type: none"> • Insert in charter that materials should be received by TDAC members 10 days in advance of the meeting instead of 5 • Page 3 - wording about participation too passive • Wording should state “Meet only quarterly and more often as needed” • Allow time at end of each meeting to identify agenda items for next meeting <p><u>Membership agreement review</u> Recommendation: Charter should clearly state “attend every <u>quarterly meeting</u>” Decision: Approved</p> <p>Recommendation: Put the words “advocate for funding” in the membership agreement. Comments:</p> <ul style="list-style-type: none"> • Communities “can’t do anything for communities without it.” • Cuts take away from priority pops more than others. Advocate then. 	<p>Decided to stick with quarterly meetings, plus option to call additional meetings as needed</p> <p>Everyone signed and turned in membership agreements. [actually, 3 did not and 1 turned it in via email without a hand-written signature-as]</p>

<p>Discuss draft of TDAC Charter and Membership Agreement/TDAC Members (con't)</p>	<ul style="list-style-type: none"> • TDAC needs a clearer sense of how the other state tobacco program dollars are being used beyond the \$2.6 million currently funding disparities activities? Need equal minimum funding for each community vs by population size. • DOH indicated that the current program and funding structure has to do with history or program. It needed to launch quickly and reach the maximum number of people through population-based approaches. Since the completion of the <i>Strategic Plan to Identify and Eliminate Health Disparities</i> the program has begun evaluating ways it can most effectively implement culturally appropriate approaches for diverse communities, while continuing its successful population-based activities. . • DOH stated that is has a responsibility to serve all citizens of the state. To develop and carry out processes which provide equal access to opportunities for all state citizens. The most defensible way to do this is through consistent and standardized approaches. This makes it difficult for DOH to use different approaches for each community. Decision: Do not add it to the membership agreement. Advocate as needed. <p>Recommendation: Change #7 of agreement from “seek culturally appropriate” to “develop and implement...”</p> <p>Decision: Approved</p> <p><i>Handouts: Draft Charter, Membership Agreement</i></p>	
<p>Announcements/Next meeting & evaluate meeting Ira SenGupta</p>	<p><u>Next meeting</u> Friday, April 15 9:30-2:30 Location: SeaTac Marriott 3201 South 176th Street Seattle, Washington 98188 USA Phone: 1-206-241-2000 Fax: 1-206-248-0789</p> <p><u>Agenda items for next time</u></p> <ul style="list-style-type: none"> • Report back on current implementation activities on reducing tobacco disparities from each community—Disparities contractors, County contractors • Program highlights • DOH staff Q&A. Evaluation/Assessment – Mike Boysun TPC Epidemiologist and Clarence Spigner from U of Washington • Relate agenda items to strategic plan and tobacco plan goals • Legislative issues—anything up-coming? Get update on strategic plan 	<ul style="list-style-type: none"> • Prepare and email agenda • Get minutes prepared , and reviewed by members so can be approved at meeting <p>Members should become familiar with:</p> <ul style="list-style-type: none"> • the tobacco program www.doh.wa.gov/tobacco and • the disparities strategic plan www.doh.wa.gov/tobacco/disparities/disparity.htm

	<ul style="list-style-type: none"> • Let each group/member share about themselves during introductions and/or during lunch or have members provide written info <p><i>Handouts: none</i></p>	
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